

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00027579	2 PAGE # 1 of 4
3 COMMITTEE NAME RECA Business M/PAC Committee		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT/SUITE #; CITY; STATE ZIP CODE 98 San Jacinto Blvd. Suite 510 Austin, TX 78701		Date Received 2015 SEP 21 PM 2:41 AUSTIN CITY CLERK RECEIVED
			Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Heidi	Receipt #	Amount
	NICKNAME LAST SUFFIX Gerbracht	Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 98 San Jacinto Blvd. Ste 510 Austin, TX 78701		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 98 San Jacinto Blvd. Ste 510 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 320-4151		
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly (Enter date below) <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (attach PAC-DR)		
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input checked="" type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02/26/2015 03/25/2015		

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME RECA Business M/PAC Committee		ACCOUNT # 00027579
13 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported
		B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported
		B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	
	14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$10 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$20 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 6,000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 63,645.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

15 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Heidi L Gerbracht

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/4	
2 FILER NAME RECA Business M/PAC Committee		3 ACCOUNT # (Ethics Commission filers) 00027579	
4 Date 03/10/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swor, Amanda (Ms.) 6 Contributor address; City; State; Zip Code 200 Lee Barton Dr. Suite 100 Austin, TX 78704	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) land use planner		10 Employer (See Instructions) The Drenner Group	

**CORPORATE OR LABOR ORGANIZATION
CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**
(for use by committees that support or oppose measures only)**SCHEDULE C-1**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 4/4

2 COMMITTEE NAME RECA Business M/PAC Committee**3** ACCOUNT # (Ethics Commission filers)

00027579

4 Date

03/10/2015

5 Corporation / Labor Organization name
Bury and Partners, Inc**6** Corporation / Labor Organization address; City; State; Zip Code
221 West 6th St.
Suite 600
Austin, TX 78701**7** Amount of
contribution (\$)

\$2,000.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Date

03/10/2015

Corporation / Labor Organization name
Bury and Partners, IncCorporation / Labor Organization address; City; State; Zip Code
221 West 6th St.
Suite 600
Austin, TX 78701Amount of
contribution (\$)

\$2,000.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐